



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: George Jackowski

Application No.: 09/621,592

Group: 1641

Filed: July 21, 2000

Examiner: L. Cook

For: Method for Diagnosing and Distinguishing Stroke and Diagnostic Devices for Use Therein

RECEIVED  
JUN 21 2002  
TECH CENTER 1600/2900

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Assistant Commissioner for Patents, P.O. Box 2327, Arlington, VA 22202	
on <u>6/12/02</u>	<u>Jessica Lancuast</u>
Date	Signature
<u>Jessica Lancuast</u>	
Typed or printed name of person signing certificate	

Assistant Commissioner for Patents  
P.O. Box 2327  
Arlington, VA 22202

Sir:

Transmitted herewith is an Amendment for filing in the above-identified application.

- [ ] Small entity status of this application under 37 C.F.R. 1.9 and 1.27 has been established by a Small Entity Statement previously submitted.
- [ ] A Small Entity Statement to establish small entity status under 37 C.F.R. 1.9 and 1.27 is enclosed.

The fee has been calculated as shown below:

(COL. 1)		(COL. 2)		(COL. 3)
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA
TOTAL	41	MINUS	* 39	2
INDEP	3	MINUS	** 3	0
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				

SMALL ENTITY	
RATE	ADDIT. FEE
X \$ 9	\$
X \$42	\$
+ \$140	\$

OTHER THAN SMALL ENTITY	
RATE	ADDIT. FEE
X \$18	\$ 36
X \$84	\$
+ \$280	\$

OR

\* not fewer than 20  
\*\* not fewer than 3

TOTAL = \$ 0

TOTAL = \$ 36

Please charge Deposit Account No. 08-0380 for the following fees:

<input type="checkbox"/>	Petition for [            ] month Extension of Time	\$	_____
<input type="checkbox"/>	Amendment Fee	\$	_____
<input type="checkbox"/>	Other Fees:		
	_____	\$	_____
	_____	\$	_____
	TOTAL:	\$	<u>0</u>


A check is enclosed in payment of the following fees:

<input checked="" type="checkbox"/>	Petition for three month Extension of Time	\$	<u>920</u>
<input checked="" type="checkbox"/>	Amendment Fee	\$	<u>36</u>
<input checked="" type="checkbox"/>	Other Fees:		
	RCE	\$	<u>740</u>
	_____	\$	_____
	TOTAL:	\$	<u>1696</u>

☒ A general authorization is hereby granted to charge Deposit Account No. 08-0380 for any fees required under 37 C.F.R. 1.16 and 1.17 in order to maintain pendency of this application. A copy of this authorization is enclosed for accounting purposes.

Respectfully submitted,

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

By   
Helen Lee  
Registration No.: 39,270  
Telephone (978) 341-0036  
Facsimile (978) 341-0136

Concord, Massachusetts 01742-9133

Dated: June 12, 2002